	1	
17	PLACE OF BIRTH ARIZON	NA STATE BOARD OF HEALTH
	11	
	District of	State Index Most us
	Town of	CERTIFICATE OF BIRTH. Co. Register No 30
	City of	Local Registrar's No
	(No	
. •	FULL NAME OF CHILD (none)	St; Ward)
-	If child is not named, make Supplemental Report on blank	obtainable from local registrar
i	Sex of Twin, Nu	mber Tegiti- Date of
	or other Oblight of	order 1 mate?yes Birth 12n 21 1913 (Month) (Day) (yr.)
	Name	Full Mother Mother
	Joe F.Arvizu	Name lary Vargas
.111.	Globe, Ariz.	Residence
2	Color Age at last 3A	Color Or Race Age at last QO
מזרתז	MCX1Can (Years)	or Race Lexican Age at last 27 Lexican (Years)
เมหล	Birthplace	Birthplace
77 0	Arizena Occupation	Lower Calif.
	Lumberman	Occupation House and Fa
WICHIE	Number of child of this mother 3 Number of children, of this mother, now living	Housewife 3
1		Samuel Ophicial de matoremi. 3. 22.6
registrar	CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*	
2 E	I hereby certify that I attended the birth of above child	; and that it occurred on Jan 22 191 3 aff w
1002	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	(Signature) (Attending physician midwife householder.*)
caci	Given or christian name added from a	Address. Aloly Taxo
ii M	supplemental report191	lo no la constante
	ried 200	LOCAL REGISTRAR
i ni w	COUNTY REGISTRAR. Filed MAY	1913 A True Copy B S JOH NUM COUNTY REGISTRAR.

Midwife with each local Registrar within a days arear on the